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PTO/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)				Docket Number (Optional)		
FY 2005				1033-T00142-C3		
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)				T 1 0 0003		
Application Number 10/612,346				Filed July 2, 2003		
For ENHANCED WIRELESS HANDSET, INCLUDING DIRECT HANDSET-TO-HANDSET COMMUNICATION MODE						
Art U	Init 2618		Examiner TRAN, Tuan A.			
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.						
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):						
		# 407 OFD 4 47(-)/4)\	<u>Fee</u>	Small Entity Fee \$60	\$	
	∐ On	e month (37 CFR 1.17(a)(1))	\$120	\$60		
	✓ Tw	o months (37 CFR 1.17(a)(2))	\$450	\$225	\$_450.00	
	Thi	ree months (37 CFR 1.17(a)(3))	\$1020	\$510	\$	
	☐ Fo	ur months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
	Fiv	e months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27.						
A check in the amount of the fee is enclosed.						
Payment by credit card. Form PTO-2038 is attached.						
The Director has already been authorized to charge fees in this application to a Deposit Account.						
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2469 . I have enclosed a duplicate copy of this sheet.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
Provide credit card information and authorization on P10-2036.						
I am the applicant/inventor.						
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).						
attorney or agent of record. Registration Number 38,342						
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34						
	MI			9-5-2006		
'	Signature		Date			
	Jeffrey G. Toler		512-327-5515			
'	Typed or printed name			Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
	Total of forms are submitted.					
				retain a hanafit by the publi	in the line in the file found but the	